Schedule E)	FOR SE OF FORM 24/48					
JAME OF COMMITTEE (In Full) Program on the Project Annual Projec						
Progressive Turnout Project	C C00580068					
Check if X 24-hour report 48-hour report New report Amends report file	ed on Man / Dab / Yayayay					
Full Name of Payee GetThru	Date of Public Distribution/Dissemination					
	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Mailing Address PO Box 2690	Amount					
PO Box 2690	Allouit					
City State Zip Code	9753.74					
Alameda CA 94501-0690	Transaction ID : VQZ6GANAYA8 Date of Disbursement or Obligation					
Purpose of Expenditure Phone Program dial fees Category/ Type	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Name of Federal Candidate Support Offi	ce Sought: House District:00					
BIDEN, JOSEPH R JR, , ,	President Senate State: 00					
Calcilda Ical lo Date	bursement For: Primary X General					
Per Election for Office Sought 1753570.28 202	Other (specify)					
Full Name of Payee	Date of Public Distribution/Dissemination					
GetThru	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Mailing Address PO Box 2690	Amount					
PO Box 2690	Amount					
City State Zip Code	539.90					
Alameda CA 94501-0690	Transaction ID: VQZ6GANAYB6 Date of Disbursement or Obligation					
Purpose of Expenditure Phone Program dial fees Category/ Type	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Name of Federal Candidate Support Off	ice Sought: House District: 00					
JONES, DOUG, , ,	President X Senate State: AL					
	bursement For: Primary X General					
Per Election for Office Sought 59401.32 202	Other (specify)					
(a) SUBTOTAL of Itemized Independent Expenditures	10293.64					
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures	4 4 4					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Pascal, Harry, , , [Electronically Filed] Date	10 20 2020					
Signature						

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 10 FOR SE OF FORM 24/48					
NAME OF COMMITTEE (In Full)	EC IDENTIFICATION NUMBER ▼					
Progressive Turnout Project	C C00580068					
Check if X 24-hour report 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y					
Full Name of Payee Date of	Public Distribution/Dissemination					
GetThru						
Mailing Address PO Box 2690 Amount						
PO Box 2690						
City State Zip Code	132.63					
	ction ID: VQZ6GANAYC2 Disbursement or Obligation					
Purpose of Expenditure Phone Program dial fees Category/ Type 1	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Name of Federal Candidate X Support Office Sought:	House District: 00					
HICKENLOOPER, JOHN W., , ,						
Calendar Year-To-Date Per Election for Office Sought Disbursement 2020 Oth	For:					
	Public Distribution/Dissemination					
GetThru	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Mailing Address PO Box 2690						
PO Box 2690						
City State Zip Code	802.76					
	tion ID : VQZ6GANAYD0 Disbursement or Obligation					
	0 19 2020					
Name of Federal Candidate Support Office Sought:	House District: 00					
OSSOFF, T. JONATHAN, , ,	nt Senate State: GA					
Calendar Year-To-Date Per Election for Office Sought Disbursement 2020 Oth	For: Primary General mer (specify)					
(a) SUBTOTAL of Itemized Independent Expenditures						
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures	7 1 7 1 7					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Pascal, Harry, , , [Electronically Filed] Date 10	20 / 2020					

Progressive Turnout Project C	ouricuale Ly		FOR SE OF FORM 24/48
Check if 24-hour report 48-hour report			FEC IDENTIFICATION NUMBER ▼
Calendar Year-To-Date Per Election for Office Sought Full Name of Payee GetThru Mailing Address PO Box 2690 City Alameda Calendar Year-To-Date President Po Payee Po Box 2690 Po Box 2690 City Alameda Calendar Year-To-Date Phone Program dial fees Po Box 2690 Po Box 2690 City Name of Federal Candidate Walking Address Po Box 2690 Po Box 2690 City Name of Federal Candidate Walking Address Po Box 2690 Po Box 2690 City Name of Federal Candidate Walking Address Po Box 2690 Po Box 2690 City Name of Federal Candidate Calendar Year-To-Date Phone Program dial fees Popose of Expenditure Phone Program dial fees Calendar Year-To-Date President Walking Address Po Box 2690 Po Box 2690 City Name of Federal Candidate Calendar Year-To-Date Phone Program dial fees Disbursement For: Primary Calendar Year-To-Date President Walking Address Po Box 2690 Po Box 2690 City Name of Federal Candidate Calendar Year-To-Date President Walking Address Po Box 2690 Po Box 2690 City Name of Federal Candidate Calendar Year-To-Date President Walking Address Po Box 2690 President Walking Addr	Progressive Turnout Project		C C00580068
Mailing Address PO Box 2690 PO Box 2690 City State Zip Code Phone Program dial fees Name of Federal Candidate Per Election for Office Sought Po Box 2690 City State Zip Code President X senate State: Calendar Year-To-Date Per Election for Office Sought Po Box 2690 PO Box 2690 City State Zip Code Transaction ID : VQZ6GANAYE8 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE8 Date of Disbursement For: President X senate State: Calendar Year-To-Date Per Election for Office Sought Po Box 2690 PO Box 2690 City State Zip Code Prose of Expenditure Phone Program dial fees Category/ Type Disbursement For: Primary Ger Transaction ID : VQZ6GANAYE6 Date of Public Distribution/Disseminate Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Amount Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE6 Date o	Check if 24-hour report 48-hour report New	report Amends report filed on	
Mailing Address PO Box 2690 PO Box 2690 City State Zip Code 779,15 Alameda CA 94501-0690 Purpose of Expenditure Phone Program dial fees Name of Federal Candidate WARNOCK, RAPHAEL Oppose Per Election for Office Sought Full Name of Payee GetThru Mailing Address PO Box 2690 PO Box 2690 City State Zip Code Po Box 2690 PO Box 2690 City State Zip Code Amount Tatasaction ID : VQZ6GANAYE8 Date of Disbursement or Obligation President X Senate State: G President X Senate State: G President Description Popose President Description Popose President Description Popose Po Box 2690 PO Box 2690 City State Zip Code Amount Category/ Popose Transaction ID : VQZ6GANAYE8 Date of Disbursement For: Primary Ger Popose Transaction ID : VQZ6GANAYE8 Date of Disbursement For: Primary Ger Popose Transaction ID : VQZ6GANAYE8 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE8 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE8 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE8 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE8 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE8 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE8 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE8 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE8 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE8 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE8 Date of Disbursement or Obligation Transaction ID : VQZ6GANAYE8 Date of Disbursement For: Primary X Ger Disbursement For: Primary X		D	Date of Public Distribution/Dissemination
City State Zip Code 779.15 Alameda CA 94501-0690 Transaction ID : VOZ6GANAYE8 Deurpose of Expenditure Phone Program dial fees Category/ Ilype To 10 19 19 2020 Name of Federal Candidate State: General Calendar Year-To-Date Per Election for Office Sought 78178.74 Calendar Year-To-Date Per Election for Office Sought 78178.74 Disbursement For: Primary General Candidate Pro Box 2690 Pro Box 2690 City State Zip Code Alameda CA 94501-0690 City State Zip Code Transaction ID : VOZ6GANAYE8 Date of Disbursement or Obligation 10 19 10 19 19 2020 Amount Transaction ID : VOZ6GANAYE8 To be of Disbursement or Obligation 10 19 10 19 19 2020 Amount 10 19 19 2020 Amount 10 19 19 2020 Amount 10 19 19 2020 Transaction ID : VOZ6GANAYE8 Transaction ID : VOZ6GANAYE8 Transaction ID : VOZ6GANAYE8 Disbursement For: Primary General Candidate Problem In			
City State Zip Code 94501-0690 Purpose of Expenditure Phone Program dial fees Category/ Type Name of Federal Candidate WARNOCK, RAPHAEL		A	mount
Alameda CA 94501-0690 Transaction ID: VQZ6GANAYE8 Date of Disbursement or Obligation Purpose of Expenditure Phone Program dial fees Category/ Type Name of Federal Candidate WARNOCK, RAPHAEL., Oppose President Sepecial Gene Full Name of Payee GetThru Mailing Address PO Box 2690 Po Box 2690 City State Category/ Type Disbursement For: Primary Gen 2020 Amount Date of Public Distribution/Dissemination Transaction ID: VQZ6GANAYE8 Date of Disbursement or Obligation President Sepecial Gene Full Name of Payee GetThru Mailing Address PO Box 2690 City State Category/ Phone Program dial fees Category/ Type Office Sought: House District: Transaction ID: VQZ6GANAYE8 Date of Disbursement For: Primary Gen 736.60 Transaction ID: VQZ6GANAYE8 Date of Disbursement or Obligation Transaction ID: VQZ6GANAYE6 Date of Disbursement or Obligation Purpose of Expenditure Phone Program dial fees Category/ Type Office Sought: House District: GREENFIELD, THERESA, . Oppose President Senate State: President Senate State: Oppose Other (specify) O		Zip Code	779.15
Purpose of Expenditure Phone Program dial fees Category/ Type		94501-0690 T	ransaction ID : VQZ6GANAYE8
WARNOCK, RAPHAEL, , ,		Category/	M M / D D / Y Y Y Y
WARNOCK, RAPHAEL,	Name of Federal Candidate	X Support Office So	ought: House District:00
Per Election for Office Sought Per Election for Office Sought Full Name of Payee GetThru Mailing Address PO Box 2690 PO Box 2690 City State Zip Code Alameda CA 94501-0690 Purpose of Expenditure Phone Program dial fees Purpose of Federal Candidate GREENFIELD, THERESA, Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Amount Calendar Year-To-Date Per Election for Office Sought Support Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-D	WARNOCK, RAPHAEL, , ,		
Full Name of Payee GetThru Mailing Address PO Box 2690 PO Box 2690 City State Zip Code Amount Category/ Type Name of Federal Candidate GREENFIELD, THERESA,		78178.74 2020 —	
Mailing Address PO Box 2690 City State Zip Code 736.60 Alameda CA 94501-0690 Transaction ID: VQZ6GANAYF6 Date of Disbursement or Obligation Purpose of Expenditure Phone Program dial fees Category/ Type M10 19 2020 Name of Federal Candidate GREENFIELD, THERESA, , Oppose President X Senate State: L Calendar Year-To-Date Per Election for Office Sought 35072.50 Disbursement For: Primary X Ger 2020 Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures			Date of Public Distribution/Dissemination
City State Zip Code 736.60 Alameda CA 94501-0690 Transaction ID: VQZ6GANAYF6 Date of Disbursement or Obligation Purpose of Expenditure Phone Program dial fees Category/ Type 10 19 2020 Name of Federal Candidate GREENFIELD, THERESA, , Oppose President Calendar Year-To-Date Per Election for Office Sought 35072.50 Calendar Year-To-Date Per Election for Office Sought 1515.75 (b) SUBTOTAL of Unitemized Independent Expenditures 1515.75	- 1 0 Box 2000	A	
Alameda CA 94501-0690 Transaction ID: VQZ6GANAYF6 Date of Disbursement or Obligation Purpose of Expenditure Phone Program dial fees Name of Federal Candidate GREENFIELD, THERESA, , , Oppose President Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures Transaction ID: VQZ6GANAYF6 Date of Disbursement or Obligation Office Sought Flow President Senate State: Disbursement For: Primary Ger 2020 Other (specify) 1515.75		Zip Code	736.60
Purpose of Expenditure Phone Program dial fees Category/ Type Name of Federal Candidate GREENFIELD, THERESA, , , Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures. Category/ Type M M M M M M M M M M M M M M M M M M M	Alameda CA	94501-0690 Tra	ansaction ID : VQZ6GANAYF6
GREENFIELD, THERESA, , , Oppose President Senate State:		Category/	M M / D D / Y Y Y
GREENFIELD, THERESA, , , Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures Oppose President Senate State: Oppose Disbursement For: Primary Other (specify) 1515.75	Name of Federal Candidate	Support Office S	cought: House District: 00
Per Election for Office Sought 35072.50 2020 Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures	GREENFIELD, THERESA, , ,		
(b) SUBTOTAL of Unitemized Independent Expenditures		0000	
	(a) SUBTOTAL of Itemized Independent Expenditures		1515.75
(c) TOTAL Independent Expenditures	(b) SUBTOTAL of Unitemized Independent Expenditures	······	
	(c) TOTAL Independent Expenditures	· · · · · · · · · · · · · · · · · · ·	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or conceins, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	with, or at the request or suggestion of, any candidate or author		
Pascal, Harry, , , [Electronically Filed] Date 10 20 2020		4	
Signature	Signature		

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OF

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Schedule E)	II OII LO	PAGE 4 OF 10 FOR SE OF FORM 24/48			
AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼			
Progressive Turnout Project		C C00580068			
heck if X 24-hour report 48-hour report New rep	oort Amends repor	rt filed on			
Full Name of Payee		Date of Public Distribution/Dissemination			
GetThru		10 19 Y Y Y Y Y			
Mailing Address PO Box 2690		Amount			
PO Box 2690	7:n Oada	1040.07			
City State Alameda CA	Zip Code 94501-0690	1919.97 Transaction ID : VQZ6GANAYG4			
	94301-0090	Date of Disbursement or Obligation			
Purpose of Expenditure Phone Program dial fees	Category/ Type	10 19 / 2020			
Name of Federal Candidate	✗ Support	Office Sought: House District: 00			
PETERS, GARY, , ,	Oppose	President X Senate State: MI			
Calendar Year-To-Date Per Election for Office Sought	151722.54	Disbursement For: Primary General 2020			
		Other (specify) ►			
Full Name of Payee GetThru		Date of Public Distribution/Dissemination			
		10 19 2020			
Mailing Address PO Box 2690 PO Box 2690		Amount			
City State	Zip Code	146.25			
Alameda CA	94501-0690	Transaction ID : VQZ6GANAYH1 Date of Disbursement or Obligation			
Purpose of Expenditure Phone Program dial fees	Category/ Type	10 19 / Y Y Y Y Y Y			
Name of Federal Candidate	x Support	Office Sought: House District: 00			
BULLOCK, STEVE, , ,	Oppose	President Senate State: MT			
Calendar Year-To-Date	1011100	Disbursement For: Primary General 2020			
Per Election for Office Sought	13414.39	Other (specify) -			
(a) SUBTOTAL of Itemized Independent Expenditures		▶ 2066.22			
(b) SUBTOTAL of Unitemized Independent Expenditures		>			
(c) TOTAL Independent Expenditures		>			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Pascal, Harry, , ,	nically Filed] Date	M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y			
Signature	Date	10 20 2020			

Progressive Turnout Project Check if 24-hour report 48-hour report New report Amends report filed on Full Name of Payee Date of Public Distribution/E	Y Y Y Y Y
Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/E	Dissemination
Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/E	Dissemination
	Dissemination
L CotThur.	
GetThru 10 19	2020
Mailing Address PO Box 2690 PO Box 2690 Amount	
City State Zip Code	950.17
Alameda CA 94501-0690 Transaction ID : VQZ6GAN Date of Disbursement or Ol	IAYJ9
Purpose of Expenditure Phone Program dial fees Category/ Type 10 19	2020
Name of Federal Candidate X Support Office Sought: House E	District:00
CUNNINGHAM, CAL, , , Oppose President X Senate	State: NC
Calendar Year-To-Date Per Election for Office Sought Disbursement For: Primary 2020 Other (see 1)	✗ General
Other (specify) ►	
Full Name of Payee GetThru Date of Public Distribution/I 10 Date of Public Distribution/I	Dissemination 2020
Mailing Address PO Box 2690 Amount	2020
PO Box 2690	
City State Zip Code	2136.96
Alameda CA 94501-0690 Transaction ID : VQZ6GAN/ Date of Disbursement or O	
Purpose of Expenditure Phone Program dial fees Category/ Type Type	2020
Name of Federal Candidate X Support Office Sought: House Description House House	District:00
HARRISON, JAIME, , , Oppose President Senate	State: SC
Calendar Year-To-Date Per Election for Office Sought 74446.76 Disbursement For: □ Primary 2020 □ Other (specify) ▶	x General
(a) SUBTOTAL of Itemized Independent Expenditures	3087.13
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultati with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is party committee) any political party committee or its agent.	
Pascal, Harry, , , [Electronically Filed] Date 10 20 2020	
Signature	

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OF

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	DENT EXPEND	iii on L3		PAGE 6 OF 10 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC I	DENTIFICATION NUMBER ▼
Progressive Turnout Project			C	C00580068
Check if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on	/ D = D / Y = Y = Y = Y
Full Name of Payee			Date of Publ	ic Distribution/Dissemination
Paychex			10 10	/ 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 911 Panorama Trl S			Amount	
City	State	Zip Code		24372.76
Rochester	NY	14625-2311		ID: VQZ6GANAYM5 ursement or Obligation
Purpose of Expenditure Staff Time Phone Calls		Category/ Type	10	19 2020
Name of Federal Candidate		✗ Support	Office Sought:	House District: 00
BIDEN, JOSEPH R JR, , ,		Oppose	✗ President	Senate State: 00
Calendar Year-To-Date Per Election for Office Sought	-,-,-	1753570.28	Disbursement For: 2020 Other (s	Primary x General pecify) ▶
Full Name of Payee			Date of Publ	lic Distribution/Dissemination
Paychex			10	19 / 2020
Mailing Address 911 Panorama Trl S			Amount	
City	State	Zip Code		1342.35
Rochester	NY	14625-2311		D: VQZ6GANAYN3 oursement or Obligation
Purpose of Expenditure Staff Time Phone Calls		Category/ Type	10 n	19 / 2020
Name of Federal Candidate		x Support	Office Sought:	House District: 00
JONES, DOUG, , ,		Oppose	President	Senate State: AL
Calendar Year-To-Date Per Election for Office Sought	.,,	59401.32	Disbursement For: 2020 Other (s	Primary X General pecify) ▶
(a) SUBTOTAL of Itemized Independent Exper	nditures			25715.11
			-	2010.11
(b) SUBTOTAL of Unitemized Independent Ex	penditures		>	7
(c) TOTAL Independent Expenditures			•	7 1 2
Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any caparty committee) any political party committee	andidate or authorize			
Pascal, Harry, , ,	[Electron	nically Filed] Date	e 10 20	2020
Signature				

Schedule E)	EXI END	TOTILO			PAGE 7		10 18
NAME OF COMMITTEE (In Full)					NTIFICATIO		
Progressive Turnout Project				Cc	00580068		
Check if 24-hour report 48-hour report	X New repo	ort Amends rep		M /	D = D /	Y	Y
Full Name of Payee Paychex				of Public	Distribution/E	Dissemination	
Mailing Address 911 Panorama Trl S			Amou	10	19	2020	_
			741100				-
City Rochester	State NY	Zip Code 14625-2311			: VQZ6GAN		ì
Purpose of Expenditure Staff Time Phone Calls		Category/ Type		of Disburs	sement or Ol	2020	Y
Name of Federal Candidate		✗ Support	Office Sough	nt:	House D	District: C	00
HICKENLOOPER, JOHN W., , ,		Oppose	Presid		Senate	State: C	,O
Calendar Year-To-Date Per Election for Office Sought		97177.75	Disbursemer 2020	nt For:	Primary	x Gen	neral
Full Name of Payee Paychex				и и и	Distribution/[Y Y Y	
Mailing Address 911 Panorama Trl S			Amou	10 int	19	2020	
City	State	Zip Code	$\neg \vdash$			1933.74	4
Rochester	NY	14625-2311			: VQZ6GANA sement or O		
Purpose of Expenditure Staff Time Phone Calls		Category/ Type		10 /	19	2020	Y
Name of Federal Candidate		x Support	Office Sough	nt:	House [District:(00
OSSOFF, T. JONATHAN, , ,		Oppose	Presid	ent x		State:	SA
Calendar Year-To-Date Per Election for Office Sought	, ,	82630.24	Disbursemer 2020	nt For:	Primary	X Ger	neral
(a) SUBTOTAL of Itemized Independent Expenditures	s		>			3985.30	П
(b) SUBTOTAL of Unitemized Independent Expenditu	ures		,				ī
(c) TOTAL Independent Expenditures				1 4	7		
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized						
Pascal, Harry, , ,	[Electron	ically Filed] Dat	e 10	20	2020		
Signature							

	Tieddic E)			FOR SE O	F FORM 24/48
	ME OF COMMITTEE (In Full)	F	EC ID	ENTIFICAT	ION NUMBER ▼
ا۲	rogressive Turnout Project		С	C00580068	
Che	eck if X 24-hour report 48-hour report New report Amends report filed	I on	M /	D D /	Y = Y = Y = Y
П	Full Name of Payee	Date of	Public	Distribution	n/Dissemination
	Paychex	M 1	0 /	19	2020
	Mailing Address 911 Panorama Trl S	Amount			
ŀ	City State Zip Code				1876.86
	Rochester NY 14625-2311			D: VQZ6GA	
	Purpose of Expenditure Staff Time Phone Calls Category/ Type	М		19	2020
ı	Name of Federal Candidate Support Offic	e Sought:		House	District: 00
	WARNOCK, RAPHAEL, , ,	Presiden	it 7	x Senate	State: GA
	Calendar Year-To-Date Per Election for Office Sought Disb. 2020	ursement		Primar	y General Special General
•	Full Name of Payee Paychex Mailing Address 911 Panorama Trl S	Date of	Public		n/Dissemination
	Old To Old				4000.00
	City State Zip Code Rochester NY 14625-2311			: VQZ6GA	
	Purpose of Expenditure Staff Time Phone Calls Category/ Type	M	O DISDU	rsement or	Obligation 2020
ľ	Name of Federal Candidate Support Offic	e Sought:		House	District:00
	ODEENIES D. THEREOA	Presider	nt 3	x Senate	State:IA
	Calendar Year-To-Date Per Election for Office Sought Disb 2020			Primar	ry X General
(a) SUBTOTAL of Itemized Independent Expenditures				3179.95
(b) SUBTOTAL of Unitemized Independent Expenditures		-5		
(c) TOTAL Independent Expenditures		-		
٧	Under penalty of perjury I certify that the independent expenditures reported herein were not movith, or at the request or suggestion of, any candidate or authorized committee or agent of either earty committee) any political party committee or its agent.				
	[Electronically Filed] Date	10 /	20		20
	Signature				

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OF

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Scl	hedule E)	LIVE			PAGE 9 OF 10 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full) Progressive Turnout Project								
Pī	ogressive Turnout Project				C C00580068			
Che	Check if 24-hour report 48-hour report New report Amends report filed on							
Т	Full Name of Payee				Date of Public Distribution/Dissemination			
	Paychex Mailing Address				10 19 2020 19 19 19 19 19 19 19 19 19 19 19 19 19			
	Mailing Address 911 Panorama Trl S				Amount			
ı	City State		Zip Code		3087.95			
	Rochester NY		14625-2311		Transaction ID : VQZ6GANAYT3 Date of Disbursement or Obligation			
	Purpose of Expenditure Staff Time Phone Calls		Category/ Type		10 / 19 / 2020			
	Name of Federal Candidate		x Support	Office	Sought: House District: 00			
ļ	PETERS, GARY, , ,		Oppose		President Senate State: MI			
	Calendar Year-To-Date Per Election for Office Sought		151722.54	Disbui 2020	rsement For: Primary			
	Full Name of Payee Paychex				Date of Public Distribution/Dissemination			
-	Mailing Address 911 Panorama Trl S				10 19 2020 Amount			
-	City State	1	Zip Code		915.64			
	Rochester NY		14625-2311		Transaction ID : VQZ6GANAYV0 Date of Disbursement or Obligation			
	Purpose of Expenditure Staff Time Phone Calls		Category/ Type		M 10 / 19 / Y 2020			
ľ	Name of Federal Candidate		x Support	Office	Sought: House District: 00			
	BULLOCK, STEVE, , ,		Oppose		President Senate State: MT			
	Calendar Year-To-Date Per Election for Office Sought	7	13414.39	Disbu 2020	rsement For:			
(a) SUBTOTAL of Itemized Independent Expenditures								
(b) SUBTOTAL of Unitemized Independent Expenditures			·· •				
(c) TOTAL Independent Expenditures			•				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.								
	Pascal, Harry, , ,	[Electron	ically Filed] Date	M 10				
	Signature		_ Date	, ,	2020			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	VI EXPEND	ITONES		PAGE 10 OF 10 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼		
Progressive Turnout Project				C C00580068		
Check if 24-hour report 48-hour report	X New rep	ort Amends repo		= M / D = D / Y = Y = Y		
Full Name of Payee			Date	of Public Distribution/Dissemination		
Paychex				10 19 2020		
Mailing Address 911 Panorama Trl S			Amou	nt		
City	State	Zip Code	— L.	2050.57		
Rochester	NY	14625-2311		action ID: VQZ6GANAYW8 of Disbursement or Obligation		
Purpose of Expenditure Staff Time Phone Calls		Category/ Type		10 19 / 2020		
Name of Federal Candidate		x Support	Office Sough	it: House District: 00		
CUNNINGHAM, CAL, , ,		Oppose	Preside	ent Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought	, , , ,	118141.68	Disbursemen 2020	ther (specify) ▶		
Full Name of Payee			Date	of Public Distribution/Dissemination		
Paychex				10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 911 Panorama Trl S			Amou	int		
City	State	Zip Code	— IT.	5613.14		
Rochester	NY	14625-2311		action ID : VQZ6GANAYX6 of Disbursement or Obligation		
Purpose of Expenditure Staff Time Phone Calls		Category/ Type		10 19 / 2020		
Name of Federal Candidate		x Support	Office Sough	nt: House District: 00		
HARRISON, JAIME, , ,		Oppose	Presid	ent Senate State: SC		
Calendar Year-To-Date Per Election for Office Sought	7 7	74446.76	Disbursemer 2020	nt For:		
(a) SUBTOTAL of Itemized Independent Expenditu	res			7663.71		
,				7 7 7		
(b) SUBTOTAL of Unitemized Independent Expendent	litures		· •	47. 1 47. 1 47.		
(c) TOTAL Independent Expenditures			•	62445.79		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Pascal, Harry, , ,	[Electron	ically Filed] Date	h 10	20 / 2020		
Signature						